## PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

Application or Docket Number 10/533496

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE		OR	OTHER THAN SMALL ENTITY	
u.s	. NATIONAL	STAGE FEES	(00	111 17	,	(Column 2)	]	RATE	FEE	1	RATE	FEE
BASIC FEE			SMALL ENT	Г. = \$ 150	LAR	GE ENT. = \$ 300		BASIC FEE	<b></b> -	OR	BASIC FEE	200
EXAMINATION FEE			Satisfies PCT A			other situations =		EXAM. FEE			EXAM. FEE	2/2
SEARCH FEE			U.S. is ISA = 3 ALL other co	\$ 50 / \$ 100 ountries =	All of	\$ 100 / \$ 200 other situations = \$ 250 / \$ 500		SEARCH FEE			SEARCH FEE	ilino
FEE FOR EXTRA SPEC. PGS.			\$ 200 / \$ min	\$ 400 nus 100 =	ļ	/ 50 <b>=</b>		X \$ 125 =			X \$ 250 =	70-
TOTAL CHARGEABLE CLAIMS			17 m	// minus 20 = .				X \$ 25 =		OR	X \$ 50 =	
INDEPENDENT CLAIMS			2 r	minus 3 = .				X \$ 100 =		OR	X \$ 200 =	<u> </u>
MUL	TIPLE DEPEN	IDENT CLAIM PRE	ESENT					+ \$ 180 =	<u> </u>	OR	+ \$ 360 =	
* If	the difference	e in column 1 is l	less than zer	o, enter "(	O" in co	olumn 2	<b>!</b> !	TOTAL	<u> </u>	OR	TOTAL	900
	CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)						·	SMALL E	r	OR	OTHER SMALL E	NTITY
A T A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID	IBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	**		=		X \$ 25 =		OR	X \$ 50 =	
AMEN	Independent	*	Minus	***		=		X \$ 100 =		OR	X \$ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =		OR	+ \$ 360 =	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
	·	(Column 1)		(Colun		(Column 3)	. ,					-
NT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	**		=		X \$ 25 =		OR	X \$ 50 =	
AME	Independent	*	Minus	***		=		X \$ 100 =		OR	X \$ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =		OR	+ \$ 360 =	
<u>-</u> -		-						TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
•	If the entry in colu	umn 1 is less than the	e estovio column	2 write "0" i	a columi	n 3						

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20".

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

FORM PTO-875 (Rev. 02/2005)